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ABSTRACT

This paper discusses current differences in the nursing education community regarding the roles of associate degree and baccalaureate degree nurses and presents a critique of the "Position Paper on Nursing Roles--Scope and Preparation" issued in 1982 by the National League for Nursing (NLN). After a discussion of the history and background of associate degree nursing, objections are presented to the NLN position paper which calls for the baccalaureate degree in nursing as the academic preparation for professional nursing practice. These objections include: (1) that the NLN recommendation encourages groups advocating changes in licensure for nurses; (2) that changes in current nursing practice and the diversified skills demanded of a nurse do not warrant a change in licensure requirements; (3) that the quality of making "independent judgments and critical decisions" that the NLN stated was required of professional nurses does not exclude associate degree nurses; and (4) that the NLN position paper failed to take into consideration that the baccalaureate nursing programs are not in a position to supply the nursing needs of the nation. (HB)

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The National League for Nursing and Associate Degree Nursing

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Paper presented at the 63rd Annual National Convention of the American Association of Community and Junior Colleges. New Orleans, LA, April 25, 1983

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It is my pleasure to be here this afternoon to participate in this forum, which has been given the very enigmatic title, "THE ASSOCIATE DEGREE NURSE: TECHNICAL OR PROFESSIONAL?" I say enigmatic, because I doubt that we are going to be able to resolve the question posed, nor are we going to be able to convince very many people, one way or the other, about the future of the associate degree nurse in relation to his or her title or designation. And perhaps the greatest enigma of all is what I, a mathematician and college administrator, am doing participating in a panel with distinguished nursing educators.

However, I am very pleased to be here. I do hope that my contribution to this forum will be provocative of some deep-thinking and soul-searching, not on the role of the associate degree nurse, but rather on the proper function and role of the National League for Nursing in the controversy presently surrounding the future of associate degree nursing in the United States.

Sharing a platform with Dr. Mildred Montag is an honor and privilege that I never anticipated. To be on a panel with Dr. Montag discussing associate degree nursing is a humbling experience. It is almost as though I were sitting at the feet of Gamaliel, for Dr. Montag is the creator and the designer of the basic concept of associate degree nursing education in the United States.

In one single generation associate degree nursing education has literally revolutionized the education of nurses, and the practice of nursing. It, also, has contributed to the improvement of the quality of patient care. Last year when we celebrated the thirtieth anniversary of associate degree nursing education we were able to proudly announce that we had graduated more than three hundred and fifty thousand associate degree nurses during the previous three decades, that we had over one hundred thousand students presently enrolled in almost eight hundred associate degree nursing programs; and that the ADN Council is the largest council in the National League for Nursing.

No mean achievement, when you consider that this is the fulfillment of the dream of a small dedicated group of educators who started from scratch and designed a program to meet a felt need in our society.

The numbers alone are a monumental achievement, but of greater significance is the fact that the institution of associate degree nursing education radically changed the composition of the nursing profession. Before the advent of associate degree nursing education, traditional nursing students in the United States were young, unmarried, white, female, members of the middle class. Today our associate degree nursing programs have a greater number of students who are older, married, mothers of children, and include a higher percentage of blacks, other minority groups, and men in their number. In my own college, College of DuPage, Glen Ellyn, Illinois, we have had students as young as eighteen years of age, and as old as sixty-three years of age. We have had mothers of large families and even a few grandmothers. The lower fees and tuition of associate degree nursing programs at community colleges have also attracted a number of students for whom a college education, or a career in nursing, would not have been possible, but for the opportunity our programs offered.

For these tremendous accomplishments we all salute Dr. Montag. It was through her seminal research on the curriculum of associate degree nursing education, and by her continuous and substantial contributions to the growth and development of associate degree nursing over the past three decades, that Dr. Montag has made an exceptional and unique contribution to nursing, nursing education, and to our country.

I know that Dr. Montag has stated in her published papers over the years, as she has stated here this afternoon, that associate degree nursing education was designed to prepare a technician, a nurse who is skilled in performing technical functions. Dr. Montag has also consistently advocated that the associate degree nurse technician is not a professional, but functions under the control and supervision of a professional nurse. I accept her position, and I recognize that in the original conception the associate degree nurse was thought of as a technical nurse.

However, I submit that the original conception does not square with the reality of today's practice of nursing and medicine. If I might twist an old academic chestnut to demonstrate my point: We might equate the committee of educators who designed associate degree nursing education to that legendary committee of educators who created a camel while trying to create a horse! The committee in creating the associate degree nurse may very well have desired to create a donkey to work for the professional nurse. However, the committee created a sleek thoroughbred, capable of functioning as a professional nurse!

Perhaps more important than the specific designation of a nurse as a technical nurse or professional nurse, is the simple fact that our licensure statutes in the fifty states do not recognize the distinction of technical or professional. Nurses are licensed as registered professional nurses and not in two separate categories: technical nurse and professional nurse!

I respectfully submit that if it were the original mission of associate degree nursing programs to educate a technical nurse, who would be recognized at a different level than the professional nurse, it is much too late in the day to go back to the original conception. The title of Thomas Wolfe's last novel, "You Can't Go Home Again," would appear to be appropriate. We just can not roll back the clock to 1952 and say, "Let us establish two categories of licensure: technical nurse for the associate degree graduate, and professional nurse for the baccalaureate degree graduate."

So much for the history and background on the issue of technical nurse versus professional nurse as it relates to associate degree nursing. This is an issue which has been resonating through the journals and magazines of nursing and nursing education for the past twenty-five years. I am not here to add fuel or fire to that controversy. My primary reason, and frankly speaking my only reason, for participating in this forum is to reiterate my vigorous exceptions to the NLN's Position Paper On Nursing Roles - Scope and Preparation, issued in February of 1982.

In April through June of 1982 I engaged in an exchange of correspondence with Margaret Walsh, at the time Executive Director of NLN, on what I perceived to be the serious implications of the NLN Position Paper. I was not satisfied by the response I received then, and subsequent statements, both public and private, by officers of the NLN have not addressed the grave issues I raised concerning the Position Paper. At the time I took vigorous exception to the Position Paper's statement calling for the baccalaureate degree in nursing as the academic preparation for professional nursing practice. I felt that statement was couched in generalities on health care and nursing that gave little logical support to the NLN's conclusion that a baccalaureate degree was the sine qua non for entry into professional practice.

My first objection to the Position Paper is that it gave aid and comfort to the groups advocating change in licensure. Ten years ago a small willful group of nurses in the State of New York arrogated unto itself the right to create a distinction without a difference when they originally put forward the "entry into practice" dogma. This "catch phrase," in substance, demands that by 1985 only nurses with a baccalaureate degree be licensed as professional nurses. That position has been endorsed by the American Nurses' Association and is totally anathema to supporters of associate degree nursing. My reading of the NLN Position Paper indicated that the Board was favoring a change in licensure. However, I was informed by the NLN that the Position Paper did nothing more than describe different educational preparations for nursing. At the time I wondered whether the Board was not placing the telescope to the blind eye and failing to see the hornet's nest of problems that the Position Paper had released.

My second objection to the Position Paper was predicated upon the statement of the NLN that the Board did not intend to endorse a change in licensure. I am willing to accept that as an honest statement of the Board's intent, but why did the members of the Board not anticipate how the position Paper would be interpreted and used by others? One cannot gainsay or minimize the impact of the prestige and authority accorded a statement issued by the

Board of the National League for Nursing. Surely, the Board was aware of the use that would be made of the statement by those relentlessly pushing for a change in licensure. In every issue of all of the leading nursing journals reference was made to the fact that the NLN had endorsed a change in entry into practice. I believe that the Board of the National League for Nursing intentionally, or unintentionally, seriously undermined the standing of those defending the present licensure laws, and the position of associate degree nursing, by issuing the Position Paper.

Perhaps I can best illustrate my frustration with the Board's Position Paper by elaborating upon the old story that Justice Oliver Wendell Holmes used to define the limits of free speech. You will recall that Justice Holmes said, "Freedom of speech does not include the right to shout 'Fire' in a crowded theater." I would go one step further and say that freedom of speech does not protect the person who innocently supplies the shouter with a megaphone to get his message to the greatest number of people! I believe that the NLN Board gave the advocates of licensure change a brand new megaphone to disseminate their message to a very large audience.

My third objection to the Position Paper is that changes in current nursing practice and the diversified skills demanded of a nurse do not in any way warrant a change in licensure requirements. When, and if, a nurse is in a position requiring advanced skills of nursing, clearly, the employer of the nurse has every right to seek a nurse who is qualified to perform those very functions. However, contrary to the statement of the Position Paper, that nurse might very well be an associate degree nursing graduate. We are presently graduating nurses from our associate degree nursing programs who do possess those skills that are alluded to in the Position Paper. But whether or not a particular nurse possesses those skills or abilities is a decision to be made on a case by case basis, and not by a blanket endorsement and preference of baccalaureate degree nurses over associate degree nurses!

My fourth objection to the Position Paper is to the statement on the ability of nurses to make "independent judgments and critical decisions." To say that critical decision-making activities are primarily the functions of baccalaureate degree nurses is to relegate associate degree nurses to a position of inferiority. Did the Board consider the legal and employment implications of the type of distinctions in the designation of nurses that the Position Paper advanced? Who would want to hire an associate degree nurse? Who would place an associate degree nurse in a position of authority? What about potential malpractice and negligence lawsuits when an associate degree nurse made a so-called critical decision? The myriad implications of the entire concept, and the callous denigration of associate degree nurses to a position of second class citizens in the hierarchy of nurses was totally unwarranted!

On the basis of educational preparation, licensure test results, and empirical evidence of comparative performance of baccalaureate degree nurses and associate degree nurses, there is absolutely no basis for the distinction in function or role that the Position Paper endorsed. A review of

the data on the comparative competencies of the associate degree nurse and the baccalaureate degree nurse, and the failure of the research to establish any appreciable differences, brings to mind the wry comment of Julian Huxley on the literature on racial superiority, "Never have so many tried so hard to prove so little!"

The Institute of Medicine in its 1983 report entitled, "Nursing and Nursing Education - Public Policies and Public Actions," noted the lack of any substantial evidence to support a finding of a measurable difference between associate degree nurses and baccalaureate degree nurses when it said,

> . . . On the issue of what education pathways provide appropriate preparation for entry into professional nursing practice, we found ambiguity in the evidence about how well graduates of the various nurse education programs that prepare students for registered nurse licensure subsequently meet various employement needs, and disagreement among those who are professionally and managerially involved in the delivery of health care.
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> As with most other kinds of postsecondary education, there is little empirical evidence on the performance differences of the graduates of these different types of nursing education programs according to established measurable criteria of knowledge, skills, and range of competencies. (Emphasis added.)

My fifth objection to the Position Paper is the NLN failed to realize that the entire question of entry into nursing practice is a very delicate and serious issue fraught with grave implications for the entire nation. Our health care delivery system, which increasingly relies upon associate degree nurses to fill the ever greater void created by the dearth of baccalaureate trained nurses, can ill afford the additional burden of a meaningless difference between professional and technical nurses. Where, pray tell, shall the desperately needed professional nurses come from? Surely, not from the established baccalaureate programs which are daily announcing the termination of their existence due to the prohibitive cost of providing quality education.

My sixth objection to the Position Paper is that if I accept the NLN's explanation of the Position Paper at face value, I am most reluctanly led to but one of two unsatisfactory conclusions. If the position paper were merely intended to be descriptive of different educational preparations for nursing, it serves no useful purpose! If it were intended to support those advocating a change in licensure, it was irresponsible and counter-productive! In either event, I do not believe that the Board of the NLN, through the issuance of the Position Paper, served the felt needs of the nation, or the specific needs of the entire nursing profession. Needless to say, a substantial portion of the membership of the NLN, who are vitally involved in associate degree nursing education has been grievously harmed by the Position Paper.

I have devoted a substantial portion of my time to setting forth my specific objections to the NLN Position Paper and the apparent inadequacies of the various rationalizations offered by the Board for the original publication of the Position Paper. I did this because I believe that the National League for Nursing is failing to live up to its stated objective "to foster the development . . . of nursing education . . . to the end that the nursing needs of the the people will be met." The NLN is also failing to give adequate and equitable representation to the interests of the various groups that comprise the League, specifically, the interests of associate degree nursing education.

How can the National League for Nursing justify having only one or two associate degree nursing representatives on its national board of thirty members, which Board is dominated by people representing baccalaureate degree nursing? How can the National League for Nursing explain the fact that it failed to make a positive and forceful statement on behalf of the merits and needs of associate degree nursing education before the Institute of Medicine, when it was taking testimony in preparation for its report on nursing and nursing education? How can the National League for Nursing justify having its spokesperson, Dr. Erline McGriff of New York University, reiterate all of the half-truths and unsubstantiated assumptions about the superiority of a baccalaureate degree nurse over an associate degree nurse, in her statement to the Insitutue of Medicine in support of more funding for baccalaureate degree programs?

These are some of the unanswered questions which raise serious doubts as to the professed commitment of the National League for Nursing to represent the best interests of associate degree nursing education. It is my sincere hope that at the NLN biennial convention in June, at Philadelphia, the adoption of one or more of the pending resolutions requesting the Board of the National League of Nursing to rescind the Position Paper On Nursing Roles - Scope and Preparation will restore the credibility of the National League for Nursing.

In the present state of affairs my college, College of DuPage, as well as a number of community college throughout the nation, are seriously questioning the need and desirability of maintaining their present affiliation with the National League for Nursing.

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